

Developing a Cultural and Linguistic Competence Training Program

What should be considered when developing and implementing a cultural competence training program?

- It should discuss overall organizational cultural competence not just the cultural elements of various racial and ethnic groups.
- But an assessment should be done so that there is training that exposes the workforce to the specific population groups and/or health issues that are frequently encountered in the area.
- It should address the linguistic access needs of patients with limited English proficiency, as outlined in the National Standards on Culturally and Linguistically Appropriate Services (CLAS).
- Conducting an organizational cultural assessment is a critical first step. Some organizations don't know what they don't know. Doing an assessment helps determine the strengths and weaknesses of staff in regard to cultural competency, and this information can be used to help design an effective training program.
- Other experts recommend conducting an assessment both before and after implementing the formal training, to determine how much staff have learned. It can also serve as a benchmark down the line.
- Be sure to start with a broad overview for new employees.
- If the organization primarily serves a specific population, such as Latinos, it should target that group or subgroups to discuss more specific care.
- An effective training program should address the three themes of the CLAS standards: organizational, clinical and linguistic competence.
- A well-rounded program also should help providers with assessment issues, such as identifying issues specific to certain ethnic patient populations but also address organizational issues that look at how gatekeepers impact access and outcomes to care.
- Many good presenters begin their presentations with a frank discussion about organizational racism. But, trainers and training directors should be careful to understand the overall orientation of the audience before delving into topics that the audience may not be ready for. Most experts agree that we have to look at ourselves because we have individual and organizational biases. Many times we aren't even aware of them, but they impact the way we provide care.
- The above was highlighted in the 2003 report Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care, which found that bias, prejudice and stereotyping on the part of health care providers may contribute to minority patients receiving lower quality care than Caucasians. A good training program needs to have such knowledge passed on in a way that speaks the individual orientation of the participant and the overall orientation of the organization.

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Tips for integrating cultural and linguistic competence into your existing training program

Adapted from the National Center for Cultural Competence

Create a structure. Convene a work group with the sole purpose of determining how core concepts relating to cultural and linguistic competency can be integrated into all aspects of the ORGANIZATION'S training program. This group will serve as the primary body for conceptualizing, planning, and framing the way in which this integration takes place. The work group membership should be diverse and should include such key stakeholders as faculty, staff, students, and community partners.

Clarify values and philosophy. Each ORGANIZATION'S training program will need to establish its own philosophy and values of cultural and linguistic competence. This approach is essential for creating a shared vision among faculty and staff to guide all efforts in this area.

Develop a logic model for cultural and linguistic competence. There are numerous concepts and definitions for cultural and linguistic competence. (See Conceptual Frameworks/Models, Guiding Values and Principles developed by the NCCC at <http://gucchd.georgetown.edu/nccc/.html>. Reach consensus on a definition or framework for cultural competence and linguistic competence within the context of the ORGANIZATION'S training program and/or department. The term logic model refers to a visual schematic that summarizes the relationship between the resources, activities, and outcomes of a culturally and linguistically competent system of care (Santiago, 2003). For more information, see the Kellogg Foundation Logic Model Development Guide, available directly from www.wkcf.org/Pubs/Tools/Evaluation/Pub3669.pdf.

Adapt or create curricula. The logic model and framework should be used to guide the adaptation or creation of curricula that infuse content on principles, values, and practices of cultural and linguistic competence that have been determined by the work group.

Determine faculty and staff development needs and interests. Conduct an initial assessment of faculty and staff to determine what they perceive as their training or professional development needs and interests related to cultural and linguistic competence. The assessment should query faculty and staff on the preferred methods, approaches, and formats for increasing awareness and acquiring new skills and areas of knowledge. Such an assessment should be repeated periodically as the group acquires knowledge and skills. Ensure that resources are budgeted to support this effort.

Conduct faculty and staff development assessment. Knowledge of cultural and linguistic competence will vary among faculty and staff. Assessment results should be used to inform strategies for faculty and staff development. Plan and conduct ongoing faculty and staff development activities based on individual needs and preferences. Careful consideration should be given to the fact that faculty and staff will have different levels of comfort with this content area. Appropriate supports should be provided and may include:

1. provide opportunities for faculty and staff to meet informally to share opinions and engage in discussions;
2. create a book club that is dedicated to exploring themes and issues of culture, race, and ethnicity that are often difficult or controversial to discuss solely on an interpersonal level;
3. convene facilitated sessions to address major issues or concerns;
4. offer mediation and conflict resolution as warranted by specific circumstances.

Create a refuge for sharing and learning. It is critical to provide a safe, non-judgmental forum to explore honestly cultural considerations—their own and those of the constituency groups they serve. Creating such a structure provides a much-needed venue to support faculty, staff, and students in their journey toward cultural and linguistic competence. Utilize social media, intranet, and online learning communities. Make it interactive, real time, and motivating. Move as far away from the traditional classroom based, obligatory, boring training as you can.

Conduct an evaluation. Develop an evaluation strategy that measures at a minimum:

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- (1) the extent to which faculty and staff have increased the incorporation of cultural and linguistic competence into all aspects of the ORGANIZATION'S training program;
- (2) the extent to which students have increased awareness, knowledge, and skills in cultural and linguistic competence;
- (3) student perspectives on the effectiveness of the faculty and training program in incorporating principles and practices of cultural and linguistic competence; and
- (4) the extent to which key consumers benefit from the culturally and linguistically competent approaches employed by the ORGANIZATION'S training program.

Training Options

There are several options for providing cultural competence training. These include using existing training programs that can be adapted for your organization; hiring a consultant to develop a program specifically for your organization; creating your own in-house training program; or a combination of all three.

What if I want to purchase a packaged or existing training program?

- There are lots of effective any effective cultural competency training programs that have already been developed by experts? One of the best for mental health is CBMCS Multicultural Training Program. <http://www.sagepub.com/cbmcs/index.htm>. It is specifically designed and tested for mental health providers and agencies.
- Some of the more widely used programs include those offered by the Cross Cultural Health Care Program, Management Sciences for Health, and the Center for Cross-Cultural Health, to name just a few (see "Resources" sidebar).
- Respected cultural competency models that can be found in literature include those developed by Isaacs and Bazron, Andrews and Boyle, Campinha-Bacote, Giger and Davidhizar, Leininger, Purnell and Spector.
- Train-the-trainer programs, such as the Cultural Competence Leadership Fellowship sponsored by the Health Research & Educational Trust and others, are considered one of the most effective formats for providing cultural competence education. The main reason is that this type of program enables an organization to reach many individuals.
- The primary benefit of using an established program is that it has been proven effective. Additionally, many of these programs provide a consultant as part of the package to explain the program and how to implement it.
- It is also important to spend the necessary time needed to research the various programs to determine which one best fits your organization's needs. For instance, some programs may emphasize cross-cultural communication skills while others may center on building community partnerships or addressing clinical issues.
- The main disadvantage of using an existing program is that it will have to be modified to fit your organization. But many of these programs were designed to be adapted. Plus, the consultant can work with you to help make the necessary adjustments.

What should I expect if I Hire a Consultant?

- A cultural competence consultant/trainer offers an objective perspective, something that is difficult to obtain from within your organization. An outside consultant can direct your organization in assessing its needs, design a program that incorporates those needs and help guide its implementation.
- While a national consultant can be very knowledgeable, a local consultant knows the community and the populations your facility serves.
- In either case, the trainer should have expertise in both clinical and organizational issues, with credentials from a reputable national or international credentialing body. A history of research and/or publications in the

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area of cultural competency is important. The individual should demonstrate a history of continuing growth in this field, because it continues to evolve. Outstanding interpersonal skills, a genuine passion for the subject and an ethics/values and personality fit with your institution round out the qualifications.

- The trainer does not necessarily have to be a racial or ethnic minority but should have extensive experience working with minority populations. You may want to ask the consultant for client references that you can contact.

Doing It Yourself

- The benefit of developing your own cultural competency training program from scratch is that your training department knows your organization's culture best and therefore has a good grasp of what approaches will be most effective. The disadvantage is that the individual responsible for this task may lack experience and/or expertise in cross-cultural health issues.
- It will be especially important to use the findings from your organizational assessment to develop your in house training program.



A do it yourself approach allows you to have a multi-prong approach to training as well. Classroom training doesn't have to be the only way that people are exposed to intercultural learning. There are other ways that employees can develop these skills. Mitchell Hammer, creator of the Intercultural Development Inventory Assessment tool suggests there are 12 key learning opportunities for intercultural learning. Using these anchors, training programs could be developed that are highly interactive and experiential. This approach also allows for shorter interventions that may be more practical for employees whose work is scheduled by appointment with clients.

Making It Work

No matter which training option an organization chooses, experts agree that buy-in from administration is essential for the program to be effective. The top players need to be committed to the concept of cultural competency, because it is their attitude that will filter down to the staff.

Leadership should be visible and send the message to middle management that they must be on board with the training initiative as well.

On-going training and creating of new learning opportunities is an important step in the program. A core set of training modules can be developed for incoming staff, but there must be new and ongoing opportunities for staff that have been around a while. It means that time and money must be invested into the developing training programs. It is an investment that will pay off in enhanced services and outcomes.